

STATE OF NEW HAMPSHIRE

2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

I. Name of Lobbyist(s) _	Maura M	1. Weston	<u> </u>		
II. Name of lobbyist's pa	rtnership, firm or corp	poration, if any:			
MM Westor	7 + ASSOCIA f partnership, firm or corpo	tes PLLC pration)	· · · · · · · · · · · · · · · · · · ·		
PO BOX 990	_	oncord,	NH	03302	
Business Address: (Street)		(Town/City)	(State)	(Zip Code)	
(108) 224 · 4077 (Telephone)	(LO3) <u> </u>	(Fax)	e-mail Maura	ae mmweston, on mich	
III. This statement cover reportable expense trans				nay file a separate report for	
All reportable transact	_			the following client:	
Purdue Pharma (Full Name of Client as it appears on the Lobbyist Registration Form)					
(Full Name of Client as it appears on the Lobbyist Registration Form) OR					
		cluding the lobbyist's	family), or the lobbying	ng firm listed below which are	
	April 26, 2017	o 3/31/17 activ	July 26, 2017 The state of th	7	
	October 25, 2017 ① ivity from 7/1/17 to 9/30/1	7 acti	January 31, 2018 \Box vity from 10/1/17 to 12/3	1/17	
V. There have been no If this box is checked, con Concord, NH 03301.	ofees received and n aplete just this form and	o reportable trans submit it to the Secr	actions made since etary of State's Office,	the last report. State House, Room 204,	
VI. Check if additional i	reports are attached:				
•	fees or made expenditur	· •		•	
If you have paid an he Expense Reimbursement	onorarium or reimburse	d expenses, you must	file Addendum B R	eport of Honorariums or	
•	your family has made po	olitical contributions,	you must file Addend	um C- Political Contributions	
Sworn Statement/Affirm I have read RSA 15, RSA and complete to the best of	15-B, RSA 14-C and R		wear or affirm that the $10-25-17$	e foregoing information is true	
(Signature of lobbyist)				ate)	
Maura M. W.	aton				
(Print Name of lobbyist)				RECEIVED	

NEW HAMPSHIRE DEPARTMENT OF STATE

JAN 09 2018

P L E A S E P R I N T

I. Name of Lobbyis

STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) Maura M. Weston	
II. Name of lobbyist's partnership, firm or corporation, if any:	
MM Weston & Associates, PLLC (Name of partnership, firm or corporation)	
III. Name of Client Purdue Pharma	Date
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The greened by any expenses:	relations, or public relations service
a) Total of all fees received in this reporting period	a) \$
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year)	b) \$ <u>24.000.</u> ω ear)
c) Total of all fees received to date (Add lines a and b)	c)\$34_000 w
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repfees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report of the Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office expendividual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of lessing lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greate restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported.	client and if expenditures are made by may be filed for the lobbyist(s)/firm e aggregate total of all expenses paid expenses; (b) the aggregate total of all le: meals purchased during a business as than \$10 that is given to the person and with a value of \$25.00 or less); and orting period of greater than \$25.00 for the of greater than \$25, purchase of the er than \$25, but not greater than \$50, expense reimbursement, or political
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a)\$_12,100 /
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$
c) Total of all itemized expenditures reported in detail in section VI	c) \$

d) Total expenses for this reporting period (Add lines a, b and c)	d)\$
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e)\$_24,000
f) Total of all expenses year to date	1,\$ 36,000
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leading period, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	n that the foregoing information
2/25	10-25-17
(Signature of lobbyist)	(Date)
Maura M. Weston	
(Print Name of lobbyist)	